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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/893,994	06/29/2001	Jong Jin Park	49128-5019	5674
9629	7590 04/07/2005		EXAMINER	
MORGAN LEWIS & BOCKIUS LLP			NGUYEN, JENNIFER T	
1111 PENNSYLVANIA AVENUE NW WASHINGTON, DC 20004			ART UNIT	PAPER NUMBER
	,		2674	
		DATE MAILED: 04/07/2005		

Please find below and/or attached an Office communication concerning this application or proceeding.

	Application No.	Applicant(s)
Interview Summary	09/893,994	PARK ET AL.
	Examiner	Art Unit
	Jennifer T Nguyen	2674
All participants (applicant, applicant's representative, PTO	personnel):	
(1) <u>Jennifer T Nguyen</u> .	(3)	
(2) <u>Mr. Yoshimura</u> .	(4)	
Date of Interview: 04 April 2005.	•	
Type: a)⊠ Telephonic b)□ Video Conference c)□ Personal [copy given to: 1)□ applicant 2	²) applicant's representative]
Exhibit shown or demonstration conducted: d) Yes If Yes, brief description:	e)⊠ No.	
Claim(s) discussed:		
Identification of prior art discussed:		
Agreement with respect to the claims f)⊠ was reached. g)□ was not reached. h)□ N	/A.
Substance of Interview including description of the general reached, or any other comments: <u>The communication between the Notice of Non-compliant amendment filed on 03/02/05 pentered</u> .	een Applicant's representative	and Examiner to verify that
(A fuller description, if necessary, and a copy of the amend allowable, if available, must be attached. Also, where no callowable is available, a summary thereof must be attached	opy of the amendments that w	reed would render the claims ould render the claims
THE FORMAL WRITTEN REPLY TO THE LAST OFFICE A INTERVIEW. (See MPEP Section 713.04). If a reply to the GIVEN ONE MONTH FROM THIS INTERVIEW DATE, OR FORM, WHICHEVER IS LATER, TO FILE A STATEMENT (Summary of Record of Interview requirements on reverse si	last Office action has already THE MAILING DATE OF THIS DF THE SUBSTANCE OF TH	been filed, APPLICANT IS SINTERVIEW SUMMARY
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Examiner Note: You must sign this form unless it is an	Tenthengy	yd
Attachment to a signed Office action.	Examiner's signa	rture, it required